Combat and Operational Stress First Aid (COSFA): Useful Tools to Promote Recovery

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Navy and Marine Corps Combat & Operational Stress Conference 2010:
"Taking Action, Measuring Results"

Naval Center COSC
Combat & Operational Stress Control

Objectives

- At the completion of this presentation the participants will:
  - Identify how COSFA fits with the Maritime Combat and Operational Stress Control Doctrine
  - Discuss the evidenced-informed foundation of COSFA
  - Describe the major COSFA components
  - Discuss the training implications for caregivers and line personnel

COSFA
Background and History

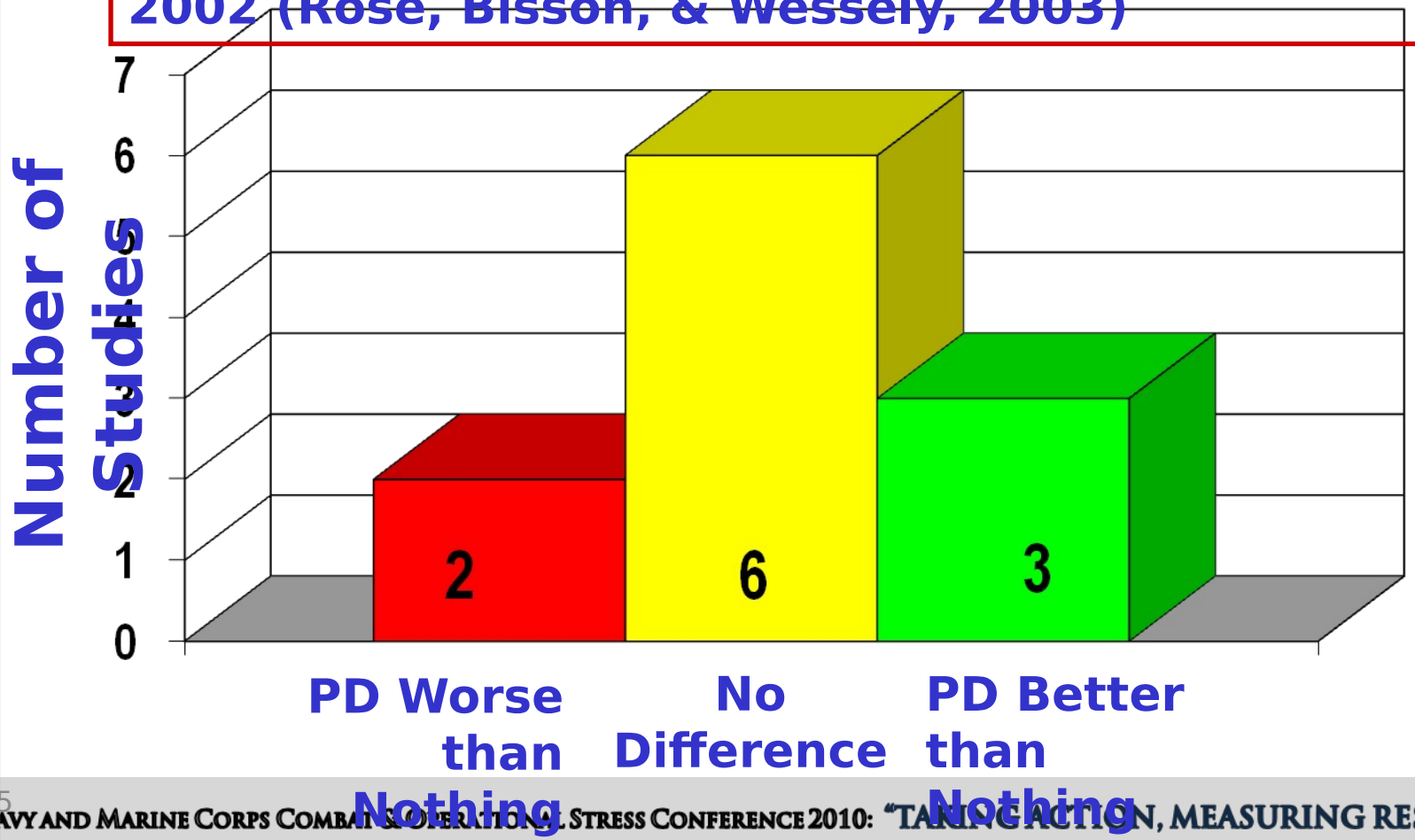
Dr. William Nash

Why COSFA?

- To replace Critical Incident Stress Debriefing (CISD) for group- or unit-level stress injuries
- For individual first aid for stress injuries (the psychological equivalent of an individual first aid kit)
- As a set of tools for leaders, family members, peers, and caregivers to promote psychological health & well-being in service members and families

Psychological Debriefing (PD): Outcomes

Cochrane Review of outcomes in 11 randomized controlled trials of PD in individuals or couples (mostly victims), followed for 6-36 months, 1997-2002 (Rose, Bisson, & Wessely, 2003)



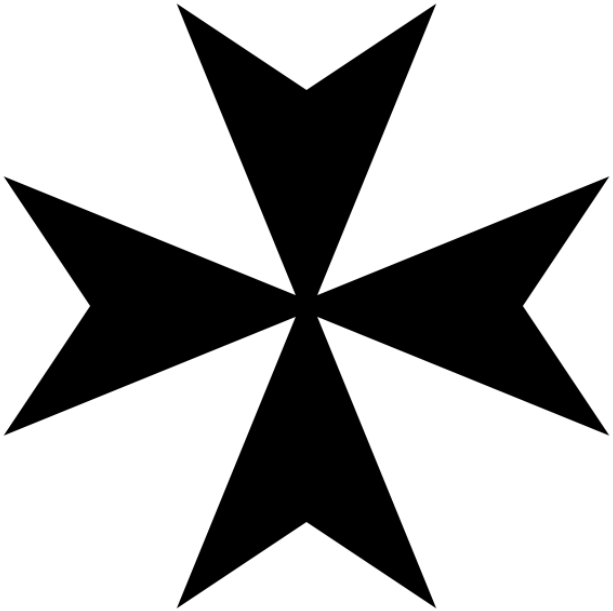
VA/DoD Clinical Practice Guidelines

- January 2004
- CISD or other forms of psychological debriefing (PD) are <u>not recommended</u>
- Early interventions should be tailored to individual needs based on individual assessments

"Sir, if stress can injure my Marines, then when are we going to get trained in first aid procedures to take care of these wounds in the field?"

– Marine Platoon Commander

Physical First Aid Was Invented By Medieval Knights



Cross of the Knights of St John of Malta, Hospitaliers

International Red Cross

Aims & Goals of First Aid (For Either Physical or Psychological Wounds)

- Preserve life
- Make safe
- Stop the spread and worsening of the damage
- Reduce suffering
- Decide whether higher levels of care are needed – refer, consult, collaborate
- Provide definitive care for injuries that don’t require professional treatment

Tools For Psychological Wellness and Well-Being Must Become Available to Everyone

- Stress problems are too common to either exclude from the USN and USMC, or refer to mental health professionals to get fixed
  - 19.7% of 13,858 Navy and USCG sailors had diagnosable mental disorders in a 2001-2003 study[1]
  - Subclinical (Orange Zone) stress problems may be 2-3X as common
  - 81% of current mental disorders in a large USN-USMC population went untreated[2]

[1]Naval Health Research Center (NHRC) Millennium Cohort Study 2007 report

[2]Hourani & Yuan 1999 report of Wellness and Readiness Study

COSFA Provides TTPs for the Last Three Core Leader Functions

COSFA targets these

Requirements For COSFA To Work in USN and USMC

- Must be line leader-led
- Must not require continuous mental health professional presence
- Must include a strong component of ongoing assessment of stress zone
- Must provide tools for ongoing care rather than one-shot intervention
- Must be adaptable to a variety of military cultures and missions
- Must be adaptable for use in families
- Must leverage the intrinsic healing factors already present in military units, such as unit cohesion

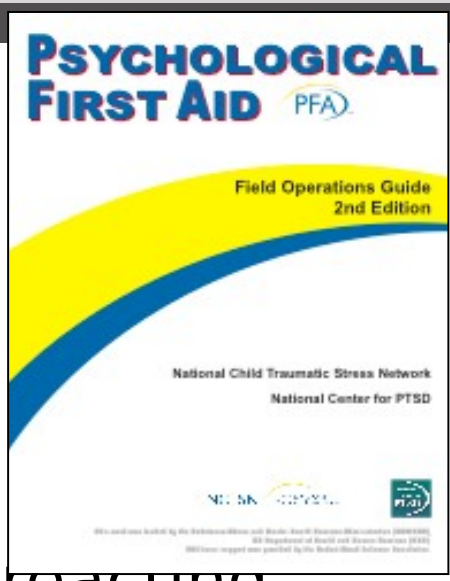
Combat and Operational Stress First Aid (COSFA) Principles

Patricia Watson, Ph.D.
National Center for PTSD

COSFA Foundation

COSFA Principles are based on a careful review of the empirical literature from many fields, as well as from the broad experiences of experts involved in work on disasters, terrorism, war and other mass casualty situations

Psychological First-Aid



- Evidence informed modular approach to help children, adolescents, adults, and families in the immediate aftermath of disaster and terrorism.
- Eight core actions.
- Focused attention on how people are reacting and interacting in the setting.
- Intended for individuals and families but can be readily adapted to groups.
- PFA adapted by American Red Cross and modified for military families facing deployment.

Field Operations Guide for Psychological First Aid published by the National Center for Child Traumatic Stress Network and National Center for PTSD (2006)

COSFA Evidence Support

- Five Essential Elements of Immediate and Mid-Term Mass Trauma Intervention: Empirical Evidence. Hobfall, Watson, Bell, et al., (2007). *Psychiatry*, 70 (4), 283.

1. Promote sense of safety
2. Promote calming
3. Promote sense of self and collective efficacy
4. Promote connectedness
5. Promote hope

COVER

- Based on research indicating that bringing a person to a relatively more safe place, and providing an accurate, authoritative voice to help circumscribe threat:
  - Can reduce biological aspects of post-traumatic stress reactions
  - Can positively affect cognitive processes that inhibit recovery

CALM

- Based on research indicating that trauma-related anxiety often generalizes, and that calming actions can reduce high arousal, numbing, or emotionality which can:
  - Interfere with sleep, eating, hydration, decision making, and performance of life tasks
  - Lead to panic attacks, dissociation, PTSD, depression, anxiety, and somatic problems, if prolonged

CONNECT

- Based on research indicating that negative social support is related to poorer recovery, and that positive social support is related to better emotional well-being and recovery following mass trauma
- Social Support provides opportunities for a range of activities, including:
  - Practical problem-solving
  - Emotional understanding and acceptance
  - Sharing of traumatic experiences
  - Normalization of reactions and experiences
  - Mutual instruction about coping

COMPETENCE

- Based on research indicating that:
  - The sense that one can cope with trauma-related events that has been found to be beneficial to recovery from traumatic stress
  - Overall sense of job competence has a buffering effect on exposure to adverse events

CONFIDENCE

- Based on research indicating that those who are likely to have more favorable outcomes after traumatic stress maintain:
  - Optimism
  - Positive expectancy
  - A feeling of confidence that life and self are predictable
  - Other hopeful beliefs (e.g., in God, that there is a high probability that things will work out as well as can reasonably be expected)

Combat and Operational Stress First Aid (COSFA) Principles

Brett Litz, Ph.D.

National Center for PTSD

7C's Stress First-Aid Model

Seven Cs of Stress First Aid:

1. CHECK
Assess: observe and listen

2. COORDINATE
Get help, refer as needed

3. COVER
Get to safety ASAP

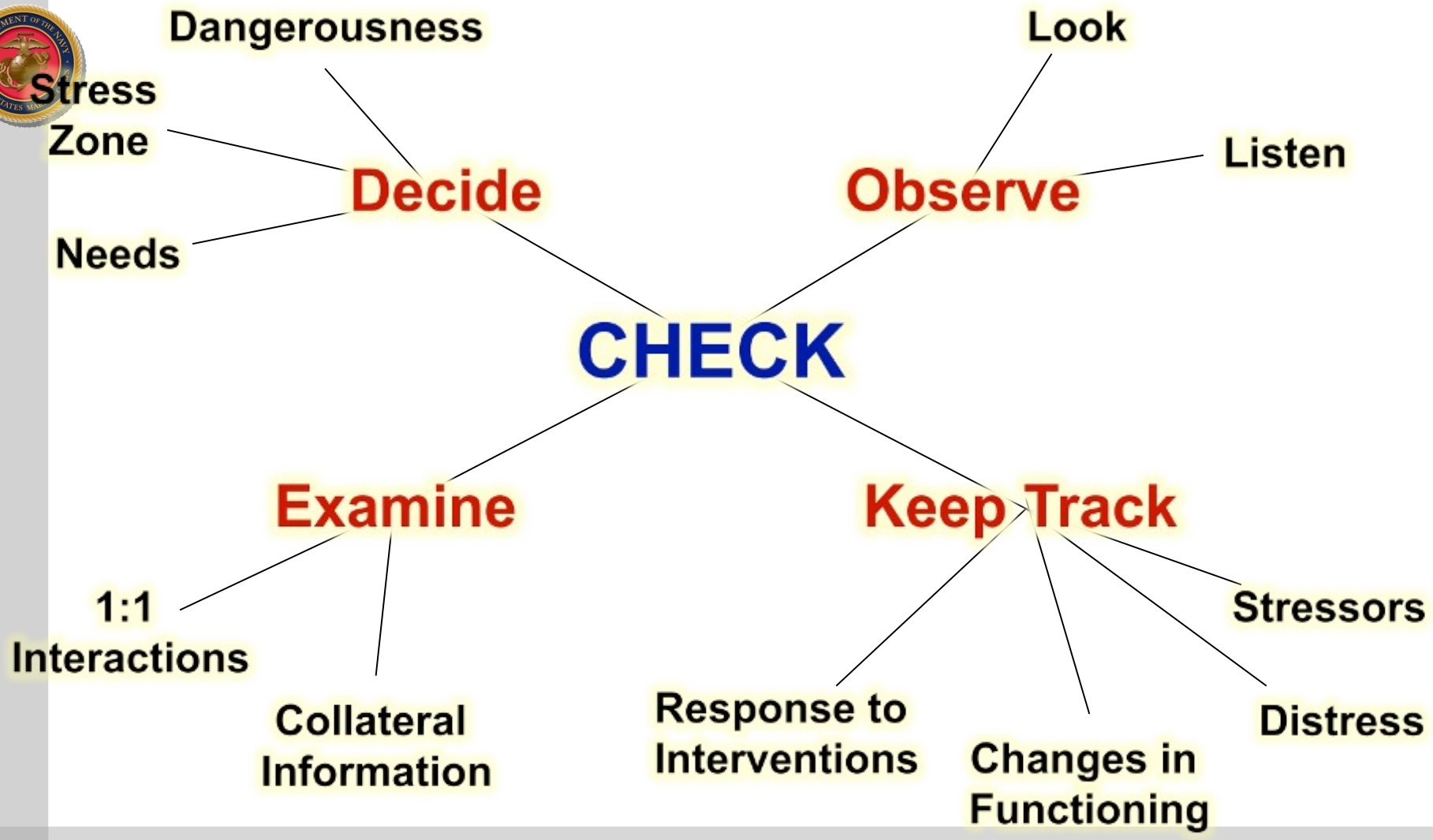
4. CALM
Relax, slow down, refocus

5. CONNECT
Get support from others

6. COMPETENCE
Restore effectiveness

7. CONFIDENCE
Restore self-esteem and hope

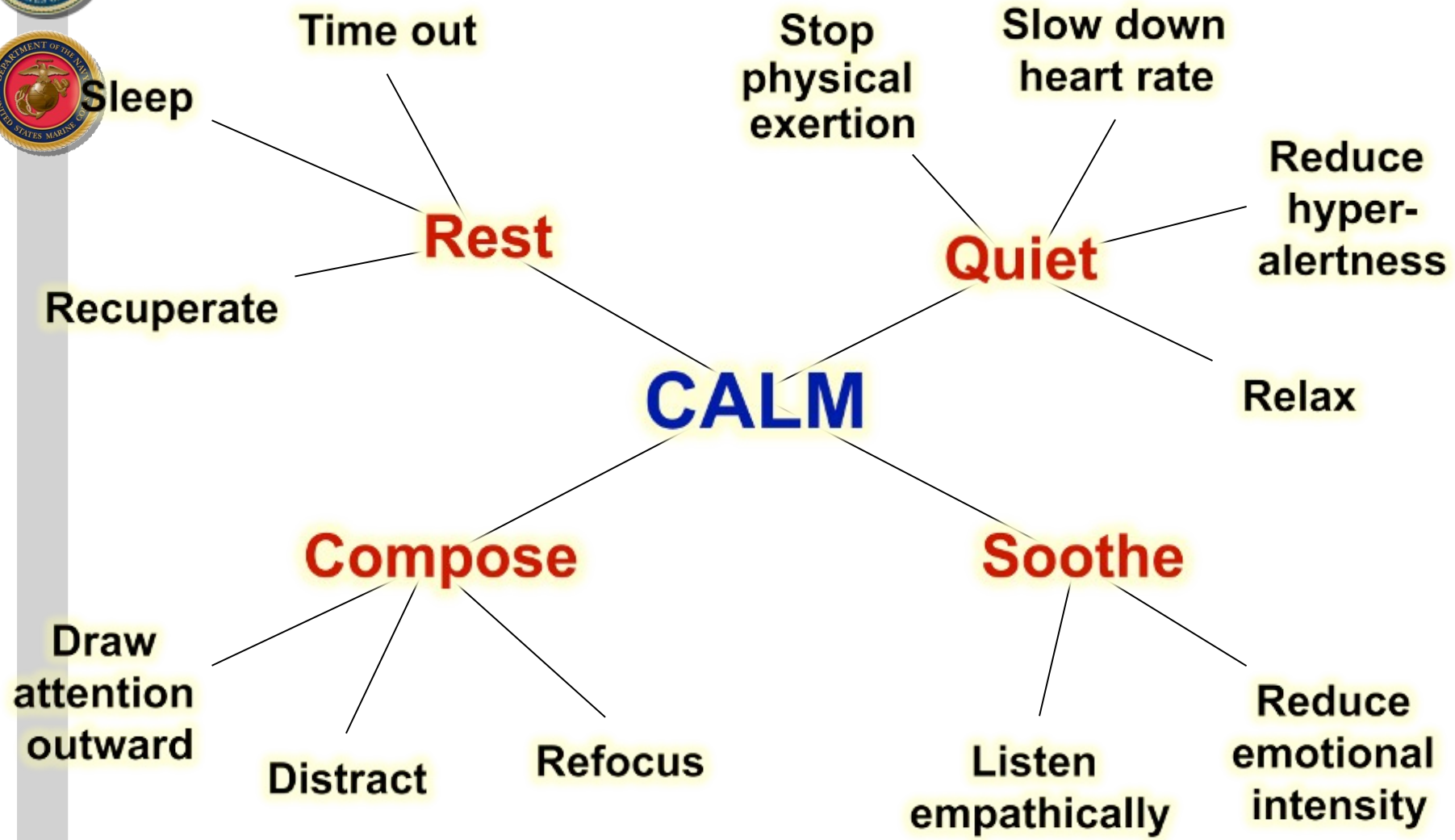
Check: What is It?



Coordinate: What is It?

Cover: What is It?

Calm: What is It?



Connect: What is It?

Competence: What Is It?

Confidence: What Is It?

COSFA
Training Rollout

CAPT Richard J. Westphal, NC

Bureau of Medicine and Surgery

7C's Stress First-Aid Model

Seven Cs of Stress First Aid:

1. **CHECK**
   Assess: observe and listen
2. **COORDINATE**
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Caregiver Training

- Goal: All Navy caregivers will know COSFA principles and integrate COSFA into their caregiver roles

- 2008 - Initial concept and awareness training
  - Over 4,000 caregivers trained via PDTC partnership
  - Integrated into command orientation at Navy MTF's
- 2009 –Psychiatric Technician Curriculum module
- 2010 – Developed one day COSFA course
  - 70 Trained facilitators world-wide
  - Over 1,000 Caregivers trained by May 2010

Way Ahead

- Caregivers
  - Establish caregiver training plan and quality control standards
  - Develop knowledge, skills, participant outcome metrics
  - COSFA instructor's course to add 200 more instructors
  - Integration into core competencies for all Navy Medicine Corps
- All Hands Goals
  - All Sailors and Marines will know and demonstrate COSFA Continuous and Primary-Aid skills
  - All Navy and Marine Corps leaders will know Secondary-Aid and Core Leader Functions
  - Medical advisors to line commanders will know and demonstrate use of COSFA principles to provide actionable unit and command level psychological health assessment

COSFA
Operational Implications

Dr. William Nash

Operationalizing COSFA

- Marine Corps
  - Operational Stress Control and Readiness (OSCAR)
  - Unit medical personnel in ground combat units (part of the marine Resiliency Study)
  - Career schools
  - COSFA for Caregivers training for chaplains, RPs, and medical and mental health professionals
- Navy
  - Career schools
  - OSC leader teams

Questions?
Comments?